

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/534744

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	/		/				
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46	/		/				
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48	/		/				
49	/		/				
50	/		/				
TOTAL IND.	5	↓	3	↓			
TOTAL DEP.	05	←	49	→			
TOTAL CLAIMS	90	[REDACTED]	32	[REDACTED]			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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97							
98							
99							
100							
TOTAL IND.		↓					
TOTAL DEP.		←					
TOTAL CLAIMS		[REDACTED]					